

COMMISSIONER FOR PATENTS
Mail Stop Patent Application
P.O. Box 1450
Alexandria, VA 22313-1450

PATENT APPLICATION
Date: February 13, 2004
File No. 1912.69647

Sir:

Transmitted herewith for filing is the patent application of

Inventor(s): Shini-chi Utsunomiya, Katsuhiko Takeuchi
Nobuyuki Myouga, Sumie Matsubayashi,
Hirohide Sugahara

I hereby certify that this paper is being deposited with the United States Postal Service as EXPRESS MAIL in an envelope addressed to: Mail Stop PATENT APPLICATION, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on this date.

February 13, 2004
Date

Dan Carr
Express Mail Label No.: EV032731616US

For: STORAGE CONTROL APPARATUS,
STORAGE APPARATUS, STORAGE
CONTROL METHOD, AND COMPUTER
PRODUCT

Enclosed are:

- (X) 29 pages of specification, including 20 claims and an abstract.
- (X) an executed oath or declaration, with power of attorney.
- () an unexecuted oath or declaration, with power of attorney.
- () _____ sheet(s) of informal drawing(s).
- (X) 8 sheet(s) of formal drawings(s).
- (X) Assignment(s) of the invention to FUJITSU LIMITED and Assignment Cover Sheet.
- (X) A check in the amount of \$ 40.00 to cover the fee for recording the assignment(s).
- (X) Information Disclosure Statement, Form PTO-1449 with cited references.
- (X) Claim for Priority and Priority Document.

Fee Calculation For Claims As Filed

a) Basic Fee					\$ 770.00
b) Independent Claims	<u>4</u>	- 3 =	<u>1</u>	x \$ 86.00 =	\$ <u>86.00</u>
c) Total Claims	<u>20</u>	- 20 =	<u>0</u>	x \$ 18.00 =	\$ _____
d) Fee for Multiple Dependent Claims				\$ 290.00 =	\$ _____

Total Filing Fee	\$ 856.00
------------------	-----------

- () Applicant(s) qualifies as a Small Entity, reducing Filing Fee by half to \$_____
- (X) A check in the amount of \$ 856.00 to cover the filing fee is enclosed.
- () Charge \$_____ to Deposit Account No. 07-2069.
- () Other _____.


- (X) The Commissioner is hereby authorized to charge any additional fees which may be required to this application under 37 C.F.R. §§1.16-1.17, or credit any overpayment, to Deposit Account No. 07-2069. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

February 13, 2004
300 South Wacker Drive – Suite 2500
Chicago, Illinois 60606
Telephone: (312) 360-0080
Facsimile: (312) 360-9315
Customer Number 24978

P:\DOCS\1924\69647\436487.DOC

GREER, BURNS & CRAIN, LTD.

By: 
Patrick G. Burns
Registration No. 29,367

16834 U.S. PTO
10/779401



021304